

No additional claim fee is required.

[X]

Patent Attorney's Docket No. <u>014823-116</u>

	IN THE UNITED STATES FATEIN	AND TRADEMARK OFFICE	크			
In re Patent Application of			JUN 10 2700	7.		
Shawn Smith, et al.		Group Art Unit: 2784	JUN 19 21 2700 MAIL	YE O E I A		
Application No.: 09/192,164)		Examiner: Greene, J.	2000 VIL RO	V		
Filed: November 13, 1998		I hereby certily that this correspond with the United States Postal Service a envelope addressed to: Commissioner of	lence to being de	in s		
M T C	C TEST SOFTWARE SYSTEM FOR MAPPING LOGICAL FUNCTIONAL SEST DATA OF LOGIC INTEGRATED CIRCUITS TO PHYSICAL SEPRESENTATION	Washington, D.C. 20231, on Vicine	Paterios and Trade , 5 - 20070 Date ATIIS	ema/		
	AMENDMENT/REPLY TR	ANSMITTAL LETTER				
	Commissioner for Patents on, D.C. 20231					
Sir:						
Encl	osed is a reply for the above-identified pate	nt application.				
[X]	A Petition for Extension of Time is also e	is also enclosed.				
[]	[] A Terminal Disclaimer and a check for [] \$55.00 (248) [] \$110.00 (148) to cover the requisite Government fee are also enclosed.					
[]	Also enclosed is					
[]	statement(s) claiming small entit	y status previously.				
([]	Applicant(s) request continued examination under 37 C.F.R. § 1.114 and enclose the [] \$345.00 (201) [] \$690.00 (101) fee due under 37 C.F.R. § 1.17(e).					
4	[] Applicant(s) previously submitted requested.	, on, for which continued exam	nination is			
[]	A Request for Entry and Consideration of (146/246) is also enclosed.	Submission under 37 C.F.R. § 1	129(a)			



Amendment/Reply Transmittal Letter Application No. <u>09/192,164</u> Attorney's Docket No. <u>014823-116</u>

Page 2 An additional claim fee is required, and is calculated as shown below: AMENDED CLAIMS S DDT'L HIGHEST NO. No. OF OF CLAIMS EXTRA RATE **CLAIMS** PREVIOUSLY **CLAIMS** FEE PAID FOR MINUS \times \$18.00 (103) = Total Claims **Independent Claims** MINUS \times \$78.00 (102) = If Amendment adds multiple dependent claims, add \$260.00 (104) Total Amendment Fee If small entity status is claimed, subtract 50% of Total Amendment Fee TOTAL ADDITIONAL FEE DUE FOR THIS AMENDMENT

[]	A claim fee	n the amount of \$	is enclosed.
ſ	1	Charge \$	to Deposit Account N	o. 02-4800.

The Commissioner is hereby authorized to charge any appropriate fees under 37 C.F.R. §§ 1.16, 1.17, 1.20(d) and 1.21 that may be required by this paper, and to credit any overpayment, to Deposit Account No. 02-4800. This paper is submitted in duplicate.

Respectfully submitted,

BURNS, DOANE, SWECKER & MATHIS, L.L.P.

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Date: June 5, 2000